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Bib Data Sheet

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| SERIAL NUMBER 10/763,340 | FILING DATE 01/23/2004 RULE | CLASS 424 | GROUP ART UNIT 1615 | ATTORNEY DOCKET NO. PC25240A |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------|

APPLICANTS

Timothy A. Hagen, East Lyme, CT;
 Julian B. Lo, Old Lyme, CT;
 Avinash G. Thombre, East Lyme, CT; Scott M. Herbig, East Lyme, CT;
 Leah Elizabeth Appel, Bend, OR;
 Marshall David Crew, Bend, OR;
 Dwayne Thomas Friesen, Bend, OR;
 David Keith Lyon, Bend, OR;
 Scott Baldwin McCray, Bend, OR;
 James Blair West, Bend, OR;

** CONTINUING DATA *****

This appln claims benefit of 60/527,084 12/04/2003

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/25/2004

| Foreign Priority claimed | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY | SHEETS | TOTAL | INDEPENDENT |
|---------------------------------|--|---------------------|-----------|------------|-------------|
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | CT | DRAWING 3 | CLAIMS 114 | CLAIMS 10 |

ADDRESS

28523
 PFIZER INC.
 PATENT DEPARTMENT, MS8260-1611
 EASTERN POINT ROAD
 GROTON, CT
 06340

TITLE

Azithromycin dosage forms with reduced side effects

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| FILING FEE | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ |
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